

Name of Person Filing Document: _____(1)
Address: _____
City, State, Zip Code: _____
Home Telephone Number: _____/
Your Day Time Telephone Number: _____
ATLAS Number (if applicable): _____(4)
Attorney Bar Number (if applicable): _____(3)
Representing: ☐ Self (Without a Lawyer) OR ☐ Attorney for ☐ Petitioner OR ☐ Respondent (2)

**SUPERIOR COURT OF ARIZONA
COUNTY OF MARICOPA**

_____(5) Case Number: _____(7)
Petitioner

**EXPEDITED PROCESS
ORDER TO APPEAR**

_____(6)
Respondent

TO: _____(8)
ADDRESS: _____(9)

A verified ***“Expedited Process Request to Enforce”*** has been filed and served upon you,

THE COURT ORDERS that you appear for an Expedited Services Conference. The Conference will be scheduled when the filing party (the party who filed the ***“Expedited Process Request to Enforce”***) provides proof of service to Expedited Services. Upon receipt of proof of service, Expedited Services will mail a notice to you and the other party advising of the date, time and location for the conference.

WARNING: Failure to appear at the conference may cause a child support or civil arrest warrant to be issued for your arrest, and/or a default judgment to be entered against you, and/or an order for any of the relief requested may be granted.

A written response or answer to the ***“Expedited Process Request to Enforce”*** is **not** required. **However, if you wish to respond in writing you have eleven (11) calendar days** from the date you were served with the ***“Expedited Process Request to Enforce”*** to file your ***“Cross Expedited Process Request to Enforce.”*** If you choose to file a response, you will need to obtain the appropriate paperwork entitled ***“Cross Expedited Process Request to Enforce”*** from the Self-Service Center at any of the following Superior Court locations:

101 W. Jefferson, 1st Floor - in Law Library Phoenix, Arizona 85003	or	Southeast Court Facility 222 E. Javelina, 1st Floor Mesa, Arizona 85210	or	Northwest Court Facility 14264 W. Tierra Buena Lane Surprise, Arizona 85374
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The cost of the packet is \$4.00. If you file a response (***“Cross Expedited Process Request to Enforce”***), you must mail or hand-deliver a copy to the other party.

IMPORTANT INFORMATION AND ORDER OF THE COURT

If this matter concerns child support, child support arrearages only, medical insurance coverage and/or spousal maintenance/support, **IT IS ORDERED** that you must bring to the conference **ALL** of the following information **with enough copies for the other party**:

1. **FINANCIAL AFFIDAVIT.** The financial affidavit attached to this Order which **MUST BE COMPLETED PRIOR** to the conference.

NOTICE: Prior to the conference, the Conference Officer, Attorney General or the Department of Economic Security will research information regarding your financial status through credit reports, bankruptcy proceedings, unemployment benefits, social security and other available financial resources.

2. **INCOME TAX RETURNS.** Copies of your Federal and State income tax returns (personal, partnership, and corporate), as well as schedules, attachments, W-2's and 1099's for the past three (3) years.
3. **PAY STUBS.** Copies of your pay stubs or statement of earnings for the last six (6) months.
4. **STATEMENT OF BENEFITS/INCOME RECEIVED.** The most recent statements reflecting the amount of any benefits received such as social security, SSI, TANF (AFDC), unemployment compensation, worker's compensation, trust income, retirement benefits and the like.
5. **ACCOUNT STATEMENTS.** Statements for the last six (6) months on accounts with:
 - A. Banks, savings and loans, and investment companies.
 - B. Credit card companies, such as VISA, American Express, Sears, Macy's, and so forth.
6. **ACTUAL COST OF MEDICAL INSURANCE FOR CHILD(REN).** Proof of the cost of medical insurance actually paid by you for the benefit of the minor child(ren). Such verification may include a letter from your employer or insurer or other appropriate proof.
7. **AVAILABILITY OF MEDICAL INSURANCE FOR CHILD(REN).** Proof of the availability of medical insurance coverage, the cost of available coverage, persons for whom you are providing medical insurance, the actual cost, the insurance carrier and the policy number.
8. **SUPPORT PAID FOR OTHER CHILDREN.** Payment records or check stubs reflecting your payment of support for child(ren) other than the child(ren) for whom support is sought in this proceeding, for the past twelve (12) months.
9. **SUPPORT TO BE CREDITED.** Proof of direct payments (such as canceled checks, money orders, other receipts, and so forth.) of support for which you are requesting credit.

At the end of the conference, Expedited Services shall submit a report to the court. This report will contain all agreements reached by both parties and/or recommendations of the Conference Officer. Based on the report, the court may do one of the following:

- A. Adopt and approve the report;
- B. Adopt and approve the report with modification;
- C. Neither adopt nor approve the report and enter its own orders;
- D. Set the case for a hearing in front of the judge;
- E. Enter other appropriate orders.

IMPORTANT INFORMATION and ORDER OF THIS COURT

If this matter concerns custody and/or parent/child access (visitation), **IT IS ORDERED** that both parties must bring to the conference, any and all documentation he/she has which will assist in responding to the allegations related to custody and/or parent/child access (visitation), **with enough copies for the other party.**

At the conclusion of the Conference, Expedited Services shall submit a report to the court. This report will contain all agreements reached by the parties and/or recommendations of the Conference Officer. Based on the report, the court may do one of the following:

- A. Adopt and approve the report;
- B. Adopt and approve the report with modification;
- C. Neither adopt nor approve the report and enter its own orders;
- D. Set the case for a hearing in front of the judge;
- E. Issue an order granting specific relief;
- F. Refer the matter to case supervision which may include counseling, supervised visitation or supervised exchange of the child(ren) or other appropriate programs;
- G. Enter other appropriate orders.

NOTICE TO BOTH PARTIES: Your conference, which includes a mandatory Pre-Conference Orientation, will be a minimum of two hours in length. Conferences are for the Petitioner and Respondent (and his or her attorney, if represented). Spouses, child(ren), family members or significant others will **not** be allowed in the conference. **DO NOT BRING CHILDREN.** They will **not** be allowed in the conference and you may **not** leave them unattended.

INTERPRETER NEEDED: If you require the services of an interpreter of a spoken language or for the deaf for this conference, please call (602) 506-3762 immediately and arrangements will be made to provide these services.

Dated: _____

Judge/Commissioner